

**B 10 (Official Form 10) (12/07)**

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA		PROOF OF CLAIM
<p style="text-align: center;"><b>Debtor against which claim is asserted : (Check only one box below:)</b></p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input checked="" type="checkbox"/> Circuit City Stores, Inc. (Case No. 08-35653)</div> <div style="width: 33%;"><input type="checkbox"/> CC Distribution Company of Virginia, Inc. (Case No. 08-35659)</div> <div style="width: 33%;"><input type="checkbox"/> Abbott Advertising, Inc. (Case No. 08-35665)</div> <div style="width: 33%;"><input type="checkbox"/> Circuit City Stores West Coast, Inc. (Case No. 08-35654)</div> <div style="width: 33%;"><input type="checkbox"/> Circuit City Stores PR, LLC (Case No. 08-35660)</div> <div style="width: 33%;"><input type="checkbox"/> Mayland MN, LLC (Case No. 08-35666)</div> <div style="width: 33%;"><input type="checkbox"/> InterTAN, Inc. (Case No. 08-35655)</div> <div style="width: 33%;"><input type="checkbox"/> Circuit City Properties, LLC (Case No. 08-35661)</div> <div style="width: 33%;"><input type="checkbox"/> Patapasco Designs, Inc. (Case No. 08-35667)</div> <div style="width: 33%;"><input type="checkbox"/> Ventoux International, Inc. (Case No. 08-35656)</div> <div style="width: 33%;"><input type="checkbox"/> Orbyx Electronics, LLC (Case No. 08-35662)</div> <div style="width: 33%;"><input type="checkbox"/> Sky Venture Corporation (Case No. 08-35668)</div> <div style="width: 33%;"><input type="checkbox"/> Circuit City Purchasing Company, LLC (Case No. 08-35657)</div> <div style="width: 33%;"><input type="checkbox"/> Kinzer Technology, LLC (Case No. 08-35663)</div> <div style="width: 33%;"><input type="checkbox"/> XSSstuff, LLC (Case No. 08-35669)</div> <div style="width: 33%;"><input type="checkbox"/> CC Aviation, LLC (Case No. 08-35658)</div> <div style="width: 33%;"><input type="checkbox"/> Courchevel, LLC (Case No. 08-35664)</div> <div style="width: 33%;"><input type="checkbox"/> PRAHS, INC. (Case No. 08-35670)</div> </div>		
<p><b>Name of Creditor (the person or other entity to whom the debtor owes money or property):</b> <u>Laura Scannell</u></p> <p><b>Name and address where notices should be sent:</b> <u>Laura Scannell</u> <u>6055 Knights Ridge Way</u> <u>Alexandria, VA 22316</u></p> <p style="text-align: right;"><b>Telephone number:</b> <u>703-924-0586 (H)</u> <u>703-216-6026 (C)</u></p>		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim.  <p><b>Court Claim Number:</b> _____ (If known)</p> <p><b>Filed on:</b> _____</p>
<p><b>Name and address where payment should be sent (if different from above):</b></p> <p style="text-align: right;"><b>Telephone number:</b> _____</p>		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.  <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
<p><b>1. Amount of Claim as of Date Case Filed:</b> \$ <u>2,029.73</u></p> <p>If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.</p> <p>If all or part of your claim is entitled to priority, complete item 5.</p> <p><input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.</p>		<p><b>5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.</b></p> <p>Specify the priority of the claim.</p> <p><input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</p> <p><input type="checkbox"/> Wages, salaries, or commissions (up to \$10,950*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtors business, whichever is earlier — 11 U.S.C. § 507(a)(4).</p> <p><input type="checkbox"/> Contributions to an employee benefit plan — 11 U.S.C. § 507(a)(5).</p> <p><input checked="" type="checkbox"/> Up to \$2,425* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use — 11 U.S.C. § 507(a)(7).</p> <p><input type="checkbox"/> Taxes or penalties owed to governmental units — 11 U.S.C. § 507(a)(8).</p> <p><input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a)( ).</p>
<p><b>2. Basis for Claim:</b> <u>Goods purchased but not received</u> (See instruction #2 on reverse side.)</p>		<p><b>Amount entitled to priority:</b> \$ <u>2,029.73</u></p> <p><small>*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment</small></p>
<p><b>3. Last four digits of any number by which creditor identifies debtor:</b> <u>0202</u></p> <p><b>3a. Debtor may have scheduled account as:</b> _____ (See instruction #3a on reverse side.)</p>		
<p><b>4. Secured Claim (See instruction #4 on reverse side.)</b> Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.</p> <p><b>Nature of property or right of setoff:</b> <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other</p> <p><b>Describe:</b> _____</p> <p><b>Value of Property:</b> \$ _____ <b>Annual Interest Rate:</b> _____ %</p> <p><b>Amount of arrearage and other charges as of time case filed included in secured claim,</b> <b>if any:</b> \$ _____ <b>Basis for perfection:</b> _____</p> <p><b>Amount of Secured Claim:</b> \$ _____ <b>Amount Unsecured:</b> \$ _____</p>		
<p><b>6. Credits:</b> The amount of all payments on this claim has been credited for the purpose of making this proof of claim.</p> <p><b>7. Documents:</b> Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements or running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See definition of "redacted" on reverse side.)</p> <p>DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.</p> <p>If the documents are not available, please explain: _____</p>		<p style="text-align: center;"><b>FOR COURT USE ONLY</b></p>
<p><b>Date:</b> <u>3/10/09</u></p> <p><b>Signature:</b> the person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.</p> <p style="text-align: center;"><u>Laura L. Scannell</u> <u>Laura L. Scannell</u></p>		

Laura Scannell  
6055 Knights Ridge Way  
Alexandria, VA 22310  
T: (703) 924-0586

March 16, 2009

Circuit City Claims Processing  
c/o Kurtzman Carson Consultants LLC  
2335 Alaska Avenue  
El Segundo, CA 90245  
T: (888) 830-4650

To Whom It May Concern:

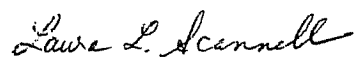
I am making a claim to recover a deposit made to Circuit City Stores, Inc. for the amount of \$2029.73, which was paid in full by personal check on January 7, 2009.

On January 3, 2009, I purchased a Samsung model LN 46A650 television and an extended warranty from the Circuit City store located in Springfield, Virginia (store #00802). The store did not have the item in stock. The sales clerk stated that I would be called when the shipment arrived, which would be in one to two weeks. However, I never received the merchandise. On a weekly basis for the next month and a half, I made follow-up calls to the Circuit City Store and was told that trucks containing the store's merchandise arrive on Fridays, they could not tell me where my order was, and I should wait for the next shipment. At no point was I informed that my order might not be filled.

I have enclosed a copy of the sales receipt and a copy of my bank statement with the paid check highlighted. Due to the poor quality of the sales receipt (faded ink), I have transcribed the information on the top portion of the copy. Please let me know if you require the original receipt. Please provide acknowledgement of the claim filing using the enclosed envelope and claim copy.

Thank you for your time and attention to this matter.

Sincerely,



Laura L. Scannell

Enclosure



**Your monthly Signature Advantage statement for January, 2009**

Customer  
LAURA L. SCANNELL  
6055 KNIGHTS RIDGE WAY

Your checking account  
4438

**You are here**

Bulletin Board

Your SunTrust accounts summary

► **Your Signature Advantage cash summary**

Your Signature Advantage investments

Balancing your Signature Advantage account

## Your Signature Advantage cash summary (continued)

### Important Information about your Signature Advantage cash activity

**Details of cash activity in date order** - below lists all cash activity in your Signature Advantage account in date order.

This includes any investment and checking activity which affects your cash. Check expense codes, if entered, are listed with the check's description. In the first column of this section:

- CHK Identifies checking activities
- INV Identifies investment activities

### Details of cash activity in date order

Class	Date	Description	Amounts added (\$)	Amounts deducted (\$)	Balance (\$)
CHK	Jan 07	Check Paid 2057		(2,029.73)	93,205.10

**Cash dividends on sweep investment**  
Dividends earned on your money market mutual fund cash sweep investment during this statement period are paid at the beginning of the next month and will appear on your next account statement.



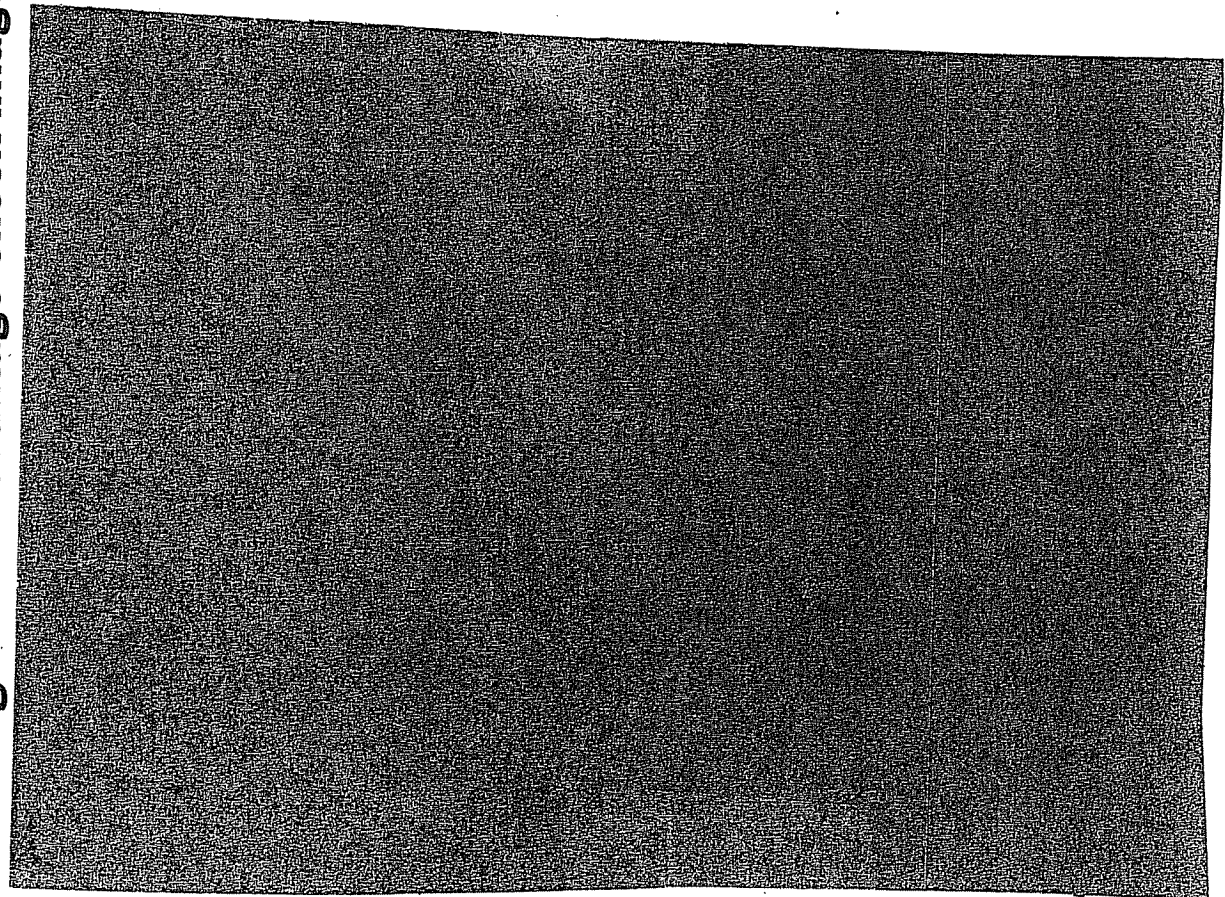
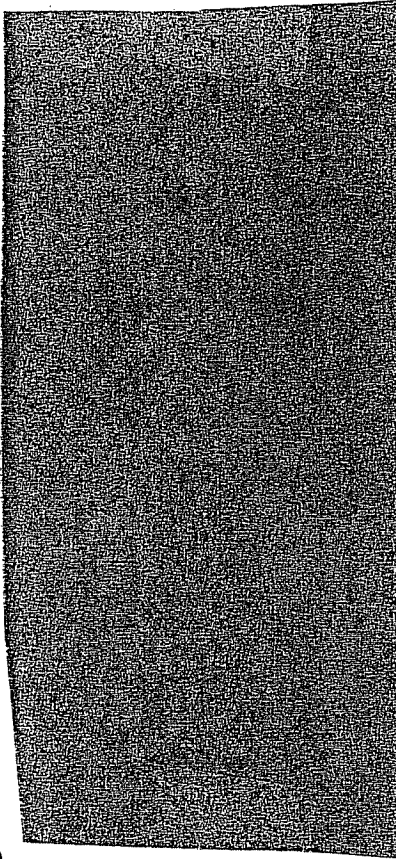
**Your monthly Signature Advantage statement for January, 2009**  
Customer  
LAURA L SCANNELL  
6055 KNIGHTS RIDGE WAY

Your checking account  
1438

**You are here**

Bulletin Board  
Your SunTrust accounts summary  
Your Signature Advantage cash summary  
Your Signature Advantage investments  
Balancing your Signature Advantage account

**Your Signature Advantage check images**



**PETS ARE FOR LIFE**

Laura L. Scannell 02.00  
6055 Knights Ridge Way  
Alpharetta, GA 30210

Pay to the Order of Current City \$ 2029.13

Just changed twenty-nine and 13/100 Dollars

SUNTRUST ACH RT 081000104

For: 205500270718 89914443810

2057 000002029731

2057 000002029731

Circuit City Store Inc.  
Store 00802  
6640 Lonsdale Rd  
Springfield, VA 22150  
(703) 922 0565

Transaction Date: 01/03/2009 4:55:54

Trans 7082 Store 00802

Reg 072

Cashier 10045300 Sales 5300

Bar Code: 00802072708220090103



Just what I needed

01/03/2009

Trans 7082

072

Cashier 10045300

00802072708220090103



46" 1080P LCD TV	1,649.99 T
SAMLN46A650	1 @ 1,649.99 W
Deposit applied:	1,732.49
Status:	New
Warranty Protection Plan	289.99
Protection Plan 36 months	
Balance Due	0.00
Sub-Total	1,939.98
Tax	89.75
Total	2,029.73
Deposited Check (S)	2,029.73
Auth: 150670 (A)	
Total Tender	2,029.73
Change Due	0.00
Minimum Deposit Amount	297.24
Deposit Paid	2,029.73
Balance Due	0.00

SAM LN46A650 has been ordered for you.  
Your Sales Associate will notify you  
when the product is received.



Just what I needed

Store 00802

40 LOISDALE RD

INGFIELD VA 22150

703 922 0565

01/03/2009

4.55

Trans 08

Cashier 0045300

00802072708210090103



46" 1080P LCD TV	1,649.99 T
SAMLN46A650	1 @ 1,649.99 W
Deposit applied:	1,732.49
Status:	New
Warranty Protection Plan	289.99
Protection Plan 36 months	
Balance Due	0.00
Sub-Total	1,939.98
Tax	89.75
Total	2,029.73
Deposited Check (S)	2,029.73
Auth: 150670 (A)	
Total Tender	2,029.73
Change Due	0.00
Minimum Deposit Amount	297.24
Deposit Paid	2,029.73
Balance Due	0.00

SAM LN46A650 has been ordered for you.  
Your Sales Associate will notify you  
when the product is received.



Just what I needed

Store 00802

40 LOT DALE RD

INGFIELD VA 22150

(703) 922-0565

01/03/2009

4:55 PM

Trans 10

Store

Cashier 0045500

Sales

00802072708220090103



00802072708220090103

46" 1080P LCD TV	1,649.99 T
SAMLN46A650	1 @ 1,649.99 W
Deposit applied:	1,732.49
Status:	New
Warranty Protection Plan	289.99
Protection Plan 36 months	
Balance Due	0.00

The Circuit City Advantage Protection Plan for the SAM LN46A650 starts on the day you receive your product and expires in 36 months. Benefits for all plans except for Monitors, Printers, Scanners, and PDAs begin on the day you receive your product. For Monitors, Printers, Scanners, and PDAs: Power surge coverage begins on the day you receive your product, all other benefits begin at the end of the manufacturer's warranty or 1 year (whichever is less). The Plan is fulfilled when products are replaced for any reason after the expiration of the manufacturer's warranty. This plan term is inclusive of the manufacturer's warranty and the store return policy. See your local store for complete details. PLEASE NOTE: YOUR CONTRACT PROVIDES MANDATORY ARBITRATION FOR ALL FUTURE DISPUTES, EXCEPT SMALL CLAIMS. ARBITRATION LIMITS SOME OF YOUR RIGHTS - FOR A LIMITED TIME, YOU MAY REJECT ARBITRATION. Refer to your Comprehensive Service Guide and Terms and Conditions for complete details including service solutions and support contact numbers.

\*\*This sales receipt and the accompanying Terms and Conditions constitute your Circuit City Advantage Protection Plan.

\*\* Thank you for your purchase.

Get a Chance to Win One of Five \$1000  
Gift Cards! Take Circuit City's  
Customer First Survey.

Queremos saber su opinion. Conteste  
nuestra encuesta por Internet

WWW.CIRCUITCITY.COM/SURVEY

Use the following customer  
code to enter on-line:

**SZW 62P3 KGKK**

No purchase necessary.  
See Circuit City stores for details.  
Void where prohibited.  
Find out where you can recycle your old  
electronics at [www.circuitcity.com/green](http://www.circuitcity.com/green).  
Thanks for making your purchase at  
Circuit City!

Customer Copy